fill in this information to identify your case:			
United States Bankruptcy Court for the:			
Middle District of Pennsylvania			
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11		
	Chapter 12 Chapter 13	С	Check i

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify	Yourself
---------	----------	----------

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting Benjamin First name Middle name Powell Last name		First name Middle name Last name
	with the trustee.	Sr Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or	Benjamin Powell	
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 4 4 4 4 OR 9 xx - xx	xxx - xx

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in	✓ I have not used any business names or EINs.	I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		92 Waverly Drive	
		Number Street	Number Street
		305	
		Stroudsburg PA 18360	
		City State ZIP Code	City State ZIP Code
		Monroe County County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain.	☐ I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)

P	art 2: Tell the Court Abou	ut Your B	ankruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	for Bank	ruptcy (Form 2010)). Als oter 7 oter 11 oter 12	on of each, see <i>Notice</i> so, go to the top of pag	Required by 11 ie 1 and check th	U.S.C. § 342(b) for Individuals Filing e appropriate box.
8.	How you will pay the fee	local your subn with I nee Appl I req By la less pay	court for more detail self, you may pay wit nitting your payment a pre-printed address at to pay the fee in i ication for Individuals uest that my fee be law, a judge may, but than 150% of the offi	s about how you man h cash, cashier's choon your behalf, your so. Installments. If you so to Pay The Filing For waived (You may read in the poverty line that so.) If you choose this	ay pay. Typicall eck, or money attorney may purchoose this opine in Installme equest this optically your fee, at applies to you soption, you m	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the ants (Official Form 103A). Ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	Yes. Distric	t		When	Case number Case number Case number
10	affiliate? Distr	or		V	VhenR	Relationship to you Case number, if known telationship to you
	Distr	ict		W	hen	Case number, if known
11	. Do you rent your residence?	No. V Yes.	Go to line 12. Has your landlord obta No. Go to line 12. Yes. Fill out <i>Initial</i> this bankruptcy pe	Statement About an E		Against You (Form 101A) and file it with

12.	Are you a sole proprietor	No. Go to Part 4.
	of any full- or part-time business?	Yes. Name and location of business
	A sole proprietorship is a	
	business you operate as an individual, and is not a separate legal entity such as	Name of business, if any
	a corporation, partnership, or LLC.	Number Street
	If you have more than one	
	sole proprietorship, use a separate sheet and attach it	
	to this petition.	City State ZIP Code
		Check the appropriate box to describe your business:
		Health Care Business (as defined in 11 U.S.C. § 101(27A))
		Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
		Stockbroker (as defined in 11 U.S.C. § 101(53A))
		Commodity Broker (as defined in 11 U.S.C. § 101(6))
		None of the above
	debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
а	rt 4: Report if You Own	Have Any Hazardous Property or Any Property That Needs Immediate Attention
4.	Do you own or have any	✓ No
	property that poses or is alleged to pose a threat	Yes. What is the hazard?
	of imminent and identifiable hazard to	
	public health or safety? Or do you own any	
	property that needs immediate attention?	If immediate attention is needed, why is it needed?
	For example, do you own	
	perishable goods, or livestock	
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: ✓ I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a certificate of completion. certificate of completion. Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. I certify that I asked for credit counseling I certify that I asked for credit counseling services from an approved agency, but was services from an approved agency, but was unable to obtain those services during the 7 unable to obtain those services during the 7 days after I made my request, and exigent days after I made my request, and exigent circumstances merit a 30-day temporary waiver circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances bankruptcy, and what exigent circumstances required you to file this case. required you to file this case. Your case may be dismissed if the court is Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. still receive a briefing within 30 days after you file. You must file a certificate from the approved You must file a certificate from the approved agency, along with a copy of the payment plan you agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case developed, if any. If you do not do so, your case may be dismissed. may be dismissed. Any extension of the 30-day deadline is granted Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 only for cause and is limited to a maximum of 15 I am not required to receive a briefing about I am not required to receive a briefing about credit counseling because of: credit counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. Disability. My physical disability causes me My physical disability causes me to be unable to participate in a to be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

duty in a military combat zone.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

duty in a military combat zone.

Pa	art 6: Answer These Ques	stions for Reporting Purpose	s			
16.	What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 				
17.	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapte Yes. I am filing under Chapte administrative expenses No Yes	•			
18.	How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 n	ion [\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	How much do you estimate your liabilities to be? Int 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 m	ion	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	or you	I have examined this petition, and	d I declare under penalty of p	erjury that the info	rmation provided is true and	
-	n you	correct. If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7.				
		If no attorney represents me and this document, I have obtained a				
		I request relief in accordance with	n the chapter of title 11, Unite	ed States Code, sp	ecified in this petition.	
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		/s/ Benjamin Powell Sr	y	c		
		Signature of Debtor 1		Signature of Deb	tor 2	
		Executed on 11/27/2018 MM / DD / Y	YYY	Executed on	I / DD /YYYY	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Patrick Best	Date	11/27/2018
Signature of Attorney for Debtor		MM / DD /YYYY
Patrick Best		
Printed name		
ARM Lawyers		
Firm name		
18 N. 8th St.		
Number Street		
Stroudsburg	PA	18360
City	State	ZIP Code
Contact phone 570-424-6899	Email address patric	k@armlawyers.com
200722	DA	
309732	PA	_
Bar number	State	

Fill in this information to identify your case:							
Debtor 1	Benjamin P	owell Sr					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Middle District of Pennsylvania							
Case number	(If known)						

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	art 1: Summarize Your Assets	
1.		Your assets Value of what you own \$ 0.00
	1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ <u>797,731.00</u>
	1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$797,731.00
Pa	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$29,056.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ <u>150.00</u>
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$39,950.10
	Your total liabilities	\$69,156.10
Pa	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>6,070.00</u>
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,985.00

Debtor 1

Middle Name

Last Name

Case number (if known)_____

Part 4:	Answer These	Questions for	Administrative	and Statistical	Records

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other Yes	r schedules.
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a perso family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box are this form to the court with your other schedules.	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$3,930.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on <i>Schedule E/F</i> , copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$15	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$1	50.00

Fill in th	is information to identify your case and this	filing:		
	Benjamin Powell Sr			
Debtor 1	First Name Middle Name	Last Name		
Debtor 2	filling) First Name Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the: Middle District of Penns	sylvania . ,		
Case num	ber			Check if this is an
				amended filing
Offic	ial Form 106A/B			
	redule A/B: Property	J		19/15
	-			12/15
categor respons	category, separately list and describe items y where you think it fits best. Be as comple sible for supplying correct information. If mo our name and case number (if known). Answ	te and accurate as possible. If two married pore space is needed, attach a separate sheet	people are filing together, bot	th are equally
Part 1:	Describe Each Residence, Building,	Land, or Other Real Estate You Own o	r Have an Interest In	
1. Do yo	u own or have any legal or equitable interes	at in any residence, building, land, or similar	property?	
✓ N	o. Go to Part 2.			
☐ Ye	es. Where is the property?	What is the property? Check all that apply.	Do not deduct secured cla	ims or exemptions. Put
		Single-family home	the amount of any secured Creditors Who Have Claim	d claims on <i>Schedule D:</i>
1.1.	Street address, if available, or other description	☐ Duplex or multi-unit building☐ Condominium or cooperative		
		Manufactured or mobile home	Current value of the centire property?	portion you own?
		Land	\$	\$
		Investment property	Describe the nature o	of your ownership
	City State ZIP Code	☐ Timeshare	interest (such as fee s	simple, tenancy by
		Other	the entireties, or a life	e estate), if known.
		Who has an interest in the property? Chec	Check if this is co	mmunity property
	County	Debtor 1 only Debtor 2 only	Check if this is con	illillullity property
	County	Debtor 1 and Debtor 2 only		
		At least one of the debtors and another		
		Other information you wish to add about	this item, such as local	
		property identification number:		
If you	own or have more than one, list here:	What is the property? Check all that apply.		
,		Single-family home	Do not deduct secured cla the amount of any secured	ims or exemptions. Put disclaims on Schedule D:
1.2.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	ns Secured by Property.
	offeet address, if available, of other description	Condominium or cooperative	Current value of the	
		Manufactured or mobile home	entire property?	portion you own?
		Land Investment property	\$	\$
	City State ZIP Code	Timeshare	Describe the nature o	of your ownership
	City State ZIF Gode	Other	interest (such as fee s the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check	one.	cotate), ii kilowii.
		Debtor 1 only		
	County	Debtor 2 only	Chook if this is as	mmunity property
		Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is con (see instructions)	mmumity property
			,	
		Other information you wish to add about to property identification number:	iis item, such as local	

Street address, if available, or other description City State ZIP Code County	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? Describe the nature of interest (such as fee the entireties, or a life. Check if this is co (see instructions)	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ If your ownership simple, tenancy by
 Add the dollar value of the portion you own for all you have attached for Part 1. Write that number he part 2: Describe Your Vehicles 	☐ At least one of the debtors and another Other information you wish to add about this ite property identification number: If of your entries from Part 1, including any entries there.	m, such as local	\$ <u>0.00</u>
Do you own, lease, or have legal or equitable interest you own that someone else drives. If you lease a vehicle 3. Cars, vans, trucks, tractors, sport utility vehicles \[\sum \text{No} \] \times Yes	e, also report it on Schedule G: Executory Contracts a		3
3.1. Make: Toyota Model: Rav 4 Vaar: 2018	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on <i>Schedule D:</i>
Approximate mileage: 700	Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
Other information: Condition: Good If you own or have more than one, describe here:	☐Check if this is community property (see instructions)	\$ 19,973.00	\$ 19,973.00
3.2. Make: Model:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on <i>Schedule D:</i>
Year:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
Other information:	☐ Check if this is community property (see instructions)	\$	\$

	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
·	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	
	Year:	Debtor 2 only		
		Debtor 1 and Debtor 2 only	current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	ontino proporty:	portion you out
	Other information:		\$	\$
		Check if this is community property (see instructions)	Ψ	Ψ
		indiadione)		
		Who has an interest in the preparty? Check are		
	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured	
	Model:	Debtor 1 only	Creditors Who Have Clain	
	Year:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see instructions)	\$	\$
		indiadione)		
4 Wate	rcraft aircraft motor homes ATVs and o	ther recreational vehicles, other vehicles, and acces	sories	
	, , ,	craft, fishing vessels, snowmobiles, motorcycle accesso		
VN	•	,		
	es			
4.1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
4.1.	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	d claims on <i>Schedule D:</i>
		Debtor 2 only	Creditors Who Have Claim	ns Secured by Froperty.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see	\$	\$
		instructions)	Ψ	Ψ
.,				
ii you	own or have more than one, list here:	Who has an interest in the property? Check one.	De not deduct consul de	dana an annanationa Dut
4.2.	Make:	Debtor 1 only	Do not deduct secured cla the amount of any secured	d claims on <i>Schedule D:</i>
	Model:	Debtor 2 only	Creditors Who Have Clain	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see	\$	\$
		instructions)		
			•	
		r all of your entries from Part 2, including any entries	_	_{\$} 19,973.00
		r all of your entries from Part 2, including any entries	_	\$_19,973.00
			_	\$19,973.00

Do you own or have any legal or equitable interest in any of the following ite	ems? Current value of the portion you own?
6. Household goods and furnishings	Do not deduct secured claims
Examples: Major appliances, furniture, linens, china, kitchenware	or exemptions.
□ No □ Yes. Describe	dresser, desk, chairs and nightstands \$\frac{250.00}{}\$
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment	
collections; electronic devices including cell phones, cameras, med Televisions, laptop computer, cell phone, small applia	
□ No Televisions, laptop computer, cell phone, small applic ☑ Yes. Describe	\$ 1,800.00
res. Describe	\$
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, p	ictures. or other art objects:
stamp, coin, or baseball card collections; other collections, memora	abilia, collectibles
□ No Stamps and sports cards - no item greater than \$600	1 500 00
✓ Yes. Describe	\$_1,500.00
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycl and kayaks; carpentry tools; musical instruments	es, pool tables, golf clubs, skis; canoes
☐ No Assorted sports equiptment	
✓ Yes. Describe	_{\$} 250.00
	Ψ
10. Firearms	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
☑ No	_{\$} 0.00
Yes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, acces	sories
☐ No Fur, Assorted clothing including pants, shirts, shoes	and jackets
✓ Yes. Describe	\$8,000.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rin gold, silver	gs, heirloom jewelry, watches, gems,
☐ No Assorted small costume jewelry	
Yes. Describe	\$ <u>7,000.00</u>
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	
☑ No	0.00
Yes. Describe	\$ <u>0.00</u>
14. Any other personal and household items you did not already list, including	ng any health aids you did not list
☑ No	
Yes. Give specific	\$ 0.00
information	
15. Add the dollar value of all of your entries from Part 3, including any entri	es for pages you have attached \$\ \grace{\strace{18,800.00}}\$
for Part 3. Write that number here	

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes Cash:	\$ <u>180.00</u>
17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No □ Yes Institution name:	
17.1. Checking account: CitiBank	_{\$} 48,000.00
Municipal Credit Union	. 0.00
17.2. Checking account: 17.3. Savings account:	
17.4. Savings account:	
17.5. Certificates of deposit: Citi	400,000,00
17.6. Other financial account: TD Bank	*
17.7. Other financial account:	
17.8. Other financial account:	
17.9. Other financial account:	
18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No □ Yes Institution or issuer name:	200,000,00
Citi Money Market	\$ 300,000.00 \$
	- \$
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☑ No ☐ Yes. Give specific information about them	¢
	6 \$, \$
	% \$

20. Government and	corporate bonds and other negotiable and non-negotiable instruments	
Negotiable instrun	nents include personal checks, cashiers' checks, promissory notes, and money orders.	
-	struments are those you cannot transfer to someone by signing or delivering them.	
☑ No	a;ff;a	
Yes. Give specinformation about them	out	
Issuer name:		
		_ \$
		_ \$
21. Retirement or pe <i>Examples:</i> Interes	nsion accounts ts in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
□No		
Yes. List each account separaty Type of account	ately. Institution name:	
,,		¢
401(k) or similar plan:	NYCERS	\$ <u>0.00</u>
Pension plan:	NTCENS	_ <u> </u>
IRA:		_ \$
Retirement account:		_ \$
Keogh:		<u> </u>
Additional account:		_ \$
Additional account:		¢
	inused deposits you have made so that you may continue service or use from a company nents with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
✓ Yes	Institution name or individual:	
Electric:		\$
Gas:		\$
Heating oil:		\$
Rental unit:		\$
Prepaid rent:		\$
Telephone:		\$
Water:		\$
Rented furniture:		\$
Other: Re	al Estate Deposit	\$ 800.00
	ract for a periodic payment of money to you, either for life or for a number of years)	
□No		
L✓ Yes TIAA-CREF	Issuer name and description:	_{\$} 325.00
- INVIOLEL		\$ <u>323.00</u> \$
		\$

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ate tuition program.	
☑ No		
Yes Institution name and description. Separately file the records of any inter-	ests.11 U.S.C. § 521(c) :
		_ \$
		*
25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights exercisable for your benefit	or powers	\neg
☑ No		
Yes. Give specific		\$0.00
information about them		\$0.00
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property		
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements		
□ No Davidson Prototype		
Yes. Give specific		. 0 500 00
information about them		\$9,500.00
27. Licenses, franchises, and other general intangibles		
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, profe	ssional licenses	
✓ No		
Yes. Give specific		
information about them		\$0.00
Money or property owed to you?		Current value of the portion you own?
		Do not deduct secured
28 Tax refunds awad to you		
28. Tax refunds owed to you		Do not deduct secured
☑ No		Do not deduct secured claims or exemptions.
✓ No ☐ Yes. Give specific information about them, including whether	Federal:	Do not deduct secured claims or exemptions.
✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns	Federal: State:	Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
✓ No ☐ Yes. Give specific information about them, including whether		Do not deduct secured claims or exemptions.
✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns	State:	Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local:	Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years. 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler 	State: Local:	Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No 	State: Local:	Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years. 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler 	State: Local:	Do not deduct secured claims or exemptions. \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No 	State: Local: nent, property settleme	Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No 	State: Local: nent, property settlement Alimony:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 ent \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No 	State: Local: nent, property settleme Alimony: Maintenance:	\$ 0.00 \$
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No 	State: Local: nent, property settleme Alimony: Maintenance: Support:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 ent \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
 ✓ No ✓ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No ✓ Yes. Give specific information 	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement:	\$ 0.00 \$
 No Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$
 ✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settler ✓ No ☐ Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, wo Social Security benefits; unpaid loans you made to someone else 	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$
 No Yes. Give specific information about them, including whether you already filed the returns and the tax years	State: Local: nent, property settleme Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$

31. Interests in insurance policies Examples: Health, disability, or life insurance No	ce; health savings account (HSA); credit, h	omeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
NY Life			_{\$} 1.00
Security Mutual Life			\$_1.00
AIG Term Life Insurance			\$_1.00
32. Any interest in property that is due you a lifyou are the beneficiary of a living trust, exproperty because someone has died. ☑ No ☐ Yes. Give specific information		, or are currently entitled to receive	\$ 0.00
33. Claims against third parties, whether or Examples: Accidents, employment disputes No	-	lemand for payment	7
Yes. Describe each claim			_{\$} 0.00
34. Other contingent and unliquidated claim to set off claims	s of every nature, including counterclain	ms of the debtor and rights	
Yes. Describe each claim			\$ <u>0.00</u>
35. Any financial assets you did not already	list		_'
✓ No ☐ Yes. Give specific information			<u>\$</u> 0.00
36. Add the dollar value of all of your entries for Part 4. Write that number here		_	_{\$} 758,858.00
Part 5: Describe Any Business-F	Related Property You Own or H	ave an Interest In. List any re	eal estate in Part 1.
37. Do you own or have any legal or equitab ☑ No. Go to Part 6. ☐ Yes. Go to line 38.	le interest in any business-related prop	erty?	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions yo	u already earned		
Yes. Describe			\$
39. Office equipment, furnishings, and supp Examples: Business-related computers, software		telephones, desks, chairs, electronic devices	
Yes. Describe			\$

40. Machinery, fixtures, equipm	nent, supplies you use in business, and tools of your trade		
☐ No ☐ Yes. Describe			\$
41. Inventory No Yes. Describe			
42. Interests in partnerships or	joint ventures		
Yes. Describe Name	e of entity:	% of ownership:	\$
		% %	\$ \$
43. Customer lists, mailing lists	s, or other compilations		
	de personally identifiable information (as defined in 11 U.S.C. § 101(41A	\)) ?	
Yes. Describe			\$
44. Any business-related prope	erty you did not already list		
Yes. Give specific information			\$
			\$ \$
			\$
			\$
	of your entries from Part 5, including any entries for pages you have at er here	tached	<u>\$</u> 0.00
	rm- and Commercial Fishing-Related Property You Own or Ha an interest in farmland, list it in Part 1.	ave an Interest In	
46. Do you own or have any leg ✓ No. Go to Part 7. ✓ Yes. Go to line 47.	gal or equitable interest in any farm- or commercial fishing-related pro	perty?	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals <i>Examples</i> : Livestock, poultry,	, farm-raised fish		
☐ No ☐ Yes]
			\$

48. Crops—either growing or harvested			
☐ Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures No Yes	s, and tools of trade		7
			\$
50. Farm and fishing supplies, chemicals, and feed			
☐ No ☐ Yes			7
			\$
51. Any farm- and commercial fishing-related property you did no	ot already list		
Yes. Give specific information			\$
52. Add the dollar value of all of your entries from Part 6, includi			\$ <u>0.00</u>
Part 7: Describe All Property You Own or Have a	an Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already li	ist?		
Examples: Season tickets, country club membership No Hillside Self Storage - Furniture and Applia	ances		
Yes. Give specific information			
54. Add the dollar value of all of your entries from Part 7. Write the	nat number here		<u>\$_100.00</u>
13 1 14 1 Tatala of Food Down of this Form			
Part 8: List the Totals of Each Part of this Form			0.00
55. Part 1: Total real estate, line 2		······	\$ <u>0.00</u>
56. Part 2: Total vehicles, line 5	\$ 19,973.00	-	
57. Part 3: Total personal and household items, line 15	\$ 18,800.00	-	
58. Part 4: Total financial assets, line 36	\$ 758,858.00	-	
59. Part 5: Total business-related property, line 45	\$0.00	-	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	-	
61. Part 7: Total other property not listed, line 54	+ \$ 100.00	- ¬	
62. Total personal property. Add lines 56 through 61	\$ 797,731.00	Copy personal property total	+ \$797,731.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		_	\$ 797,731.00

Fill in this in	formation to ide	entify your case:	
Debtor 1	Benjamin Powell	Sr	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	or the: Middle District of Pennsy	rlvania
Case number (If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim	as Exempt		
 Which set of exemptions are you claiming? You are claiming state and federal nonbank You are claiming federal exemptions. 11 U. 	ruptcy exemptions. 11 U.S.C		
2. For any property you list on Schedule A/B th	at you claim as exempt, fill	in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Household goods - Assorted household furni including couch, beds, dresser, desk, chairs description: nightstands Line from Schedule A/B: 6		\$\frac{250.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Electronics - Televisions, laptop computer, co	\$_1,800.00	1,800.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief Collectibles of value - Stamps and sports cardescription: Collectibles of value - Stamps and sports cardescription: Line from Schedule A/B: 8	\$ 1,500.00	1,500.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 y ✓ No ☐ Yes. Did you acquire the property covered by ☐ No ☐ Yes	years after that for cases filed	,	

Case number (if known)_

Part 2:

Additional Page

		Current value of the portion you own	exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Line	ription: from	\$250.00	\$\frac{250.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief desc Line	edule A/B: 9 Clothing - Assorted clothing including pants, shirts, shoes and jackets ription: from edule A/B: 11	\$1,000.00	\$\frac{1,000.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief desc	Clothing - Fur ription:	\$7,000.00	\$ 6,100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief desc	ription:	\$7,000.00	\$\frac{900.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(4)
Brief desc	edule A/B: 11 Cash on hand (Cash On Hand) ription:	\$ <u>180.00</u>	\$\frac{180.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Sche Brief desc	edule A/B: 16 CitiBank (Checking)	\$ <u>48,000.00</u>	\$\frac{11,850.00}{100\% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief desc Line	ription: from	\$_100.00	\$\frac{100.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief desc	ription:	\$_800.00	\$ 800.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief desc	ription: from	\$ <u>325.00</u>	\$\frac{325.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(10)(e)
Brief desc	edule A/B: 23 NY Life ription: from	\$_1.00	1.00 \$ 1.00 In any applicable statutory limit	11 USC § 522(d)(7)
Sche Brief desc	edule A/B: 31 Security Mutual Life	\$ <u>1.00</u>	\$ 1.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(7)
Sche Brief desc	edule A/B: 31 AIG Term Life Insurance	\$ <u>1.00</u>	\$\frac{1.00}{100\% of fair market value, up to	11 USC § 522(d)(7)
Line Sche	from edule A/B: 31		any applicable statutory limit	

						Ī			
Fill in this in	formation to identify you	r case:							
Debtor 1	Benjamin Powell Sr								
Debtor 2	First Name	Middle Name		Last Name					
(Spouse, if filing)	First Name	Middle Name		Last Name					
United States E	Bankruptcy Court for the: Midd	lle District of Pe	ennsylvania						
Case number				•					
(If known)									if this is an
								amend	ed filing
Official	Form 106D								
Sched	ule D: Credit	ors W	ho H	ave Cla	aims	Secure	ed by Pro	perty	12/15
	ete and accurate as poss								
	If more space is needed, ages, write your name an				ıt, number	the entries,	and attach it to this	s form. On the top of	any
- P -	<u> </u>	-	,	•					
_ `	editors have claims secu								
_	eck this box and submit the		court with	your other so	hedules. Y	ou have nothi	ng else to report on	this form.	
L Tes. FI	ii iii ali oi tile iilloiillatioii b	eiow.							
Part 1: Lis	st All Secured Claims								
							Column A	Column B	Column C
	cured claims. If a creditor laim. If more than one cred						Amount of claim	Value of collateral	Unsecured portion
	s possible, list the claims in						Do not deduct the value of collateral.	that supports this claim	If any
2.1 Ally		Desci	rihe the nr	operty that se	cures the c	rlaim:	\$ 29,056.00	\$ 19,973.00	\$ 9,083.00
			<u>-</u>	v 4 - \$19,973		,iaiiii.	Ψ_20,000.00	 	Ψ_0,000.00_
Creditor's Nar			royota ric	ν τ ψιο,οιο	.00				
PO Box 9	Street								
				6 1 (1 1					
Louisville	KY 40290		the date yontingent	ou file, the cla	aim is: Ched	ck all that apply.			
City	State ZIP Co		nliquidated						
	he debt? Check one.	_	sputed						
Debtor 1		Natur	e of lien. C	heck all that ap	ply.				
Debtor 2	only and Debtor 2 only			t you made (suc	ch as mortga	ge or secured			
	ne of the debtors and another		ır loan) atutory lien	(such as tax lie	n mechanic'	's lien)			
Check if	this claim relates to a	☐ Ju	ıdgment lier	from a lawsuit		o,			
commun	nity debt			ng a right to offs			_		
Date debt wa	as incurred			account numb					
<u> </u>		Desci	ribe the pr	operty that se	cures the c	claim:	\$	_ \$	\$
Creditor's Nar	me								
Number	Street								
				ou file, the cla	aim is: Ched	ck all that apply.			
City	State ZIP Co		ontingent nliquidated						
Who owes the	he debt? Check one.		sputed						
Debtor 1	only		•	heck all that ap	ply.				
Debtor 2	•	_		t you made (suc	· -	ge or secured			
_	and Debtor 2 only ne of the debtors and another	ca	ır loan)		_	_			
_				(such as tax lie		s lien)			
☐ Check if commun	this claim relates to a nity debt		-	ng a right to offs			_		
Date debt wa	as incurred	Last 4	digits of	account numb	per				
Add the d	lollar value of your entrie	s in Column	A on thi	s page. Write	that num	ber here:	\$ <u>29,056.00</u>	_	

\square	htor	1

Part 2:

Benjamin	Powell Sr	Case number (if known)_

First Name Middle Name Last Name

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? _ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? _ Last 4 digits of account number Name Street City ZIP Code On which line in Part 1 did you enter the creditor? ___ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number Name Street ZIP Code

Fil	ll in this in	formation to identify yo	our case:					
De	ebtor 1	Benjamin Powell Sr						
	-	First Name	Middle Name	Last Name				
	ebtor 2 oouse, if filing)	First Name	Middle Name	Last Name				
Un	ited States E	Bankruptcy Court for the: Mi	iddle District of Pe	ennsylvania			П.,	
	ise number known)			· ·				ck if this is an nded filing
Of	ficial F	orm 106E/F						
So	chedu	ule E/F: Cred	ditors W	/ho Have Unsecu	red Claim	S		12/15
List A/B cred need any	the other: Property ditors with ded, copy additiona	party to any executory (Official Form 106A/B) partially secured claim	contracts or u and on Sched ns that are liste t out, number t ne and case nu	,	t in a claim. Also lis Unexpired Leases (C Have Claims Secure	t executory co Official Form 1 and by Property	ontracts on <i>S</i> 06G). Do not . If more spa	<i>chedule</i> include any ce is
		editors have priority un	secured claims	s against you?				
	□ No. Go ☑ Yes.	to Part 2.						
2.	List all of each claim nonpriority unsecured	listed, identify what type amounts. As much as po claims, fill out the Contin	of claim it is. If ossible, list the claustion Page of	editor has more than one priority ur a claim has both priority and nonpr claims in alphabetical order accordi Part 1. If more than one creditor ho nstructions for this form in the instru	iority amounts, list thang to the creditor's na lds a particular claim,	at claim here ar ime. If you have	nd show both pe more than to	oriority and vo priority
	(i oi aii exp	danation of each type of	ciaiiii, see tile i		action bookiet.)	Total claim	Priority	Nonpriority
2.1	Internal I	Revenue Service				0.00	amount \$ 0.00	s0.00
	Priority Cred	ditor's Name		Last 4 digits of account number		\$_0.00	\$ 0.00	\$ <u>0.00</u>
	P.O. Box			When was the debt incurred?				
	number	Street		As of the date you file, the claim	is: Check all that apply.			
	Philadelp		19101-7346 ZIP Code	Contingent				
	City	State urred the debt? Check one		Unliquidated				
	Debtor		•	☐ Disputed Type of PRIORITY unsecured	claim:			
	Debtor	•		Domestic support obligations				
	_	 1 and Debtor 2 only st one of the debtors and and 	thor	Taxes and certain other debts yo				
	_			Claims for death or personal injurintoxicated	ry while you were			
		k if this claim is for a com	imumity debt	Other. Specify				
	✓ No	im subject to offset?						
2.2	Pennsyl	vania Department of Rev	/enue	Last 4 digits of account number		\$150.00	<u>\$0.00</u>	\$150.00
	•	ditor's Name		When was the debt incurred?				
	PO Box Number	281041 Street		As of the date you file, the claim	is: Check all that apply			
				Contingent	ior oncon an anal appriy.			
	Harrisbu		17128	Unliquidated				
	City	State	ZIP Code	☐ Disputed				
		urred the debt? Check one r 1 only	Э.	Type of PRIORITY unsecured	claim:			
		r 2 only		☐ Domestic support obligations				
	_	r 1 and Debtor 2 only st one of the debtors and and	othor	Taxes and certain other debts yo				
				Claims for death or personal injurintoxicated	ry while you were			
		k if this claim is for a con	iiiiunity aept	Other. Specify				
	Is the cla	im subject to offset?						
	Yes							

-	L	٠.	 4
Р			

Case number	(if known)		

Da		ς.
	и.	۷.

	Do any creditors have nonpriority unsecured claims against yo No. You have nothing to report in this part. Submit this form to the Yes		
	List all of your nonpriority unsecured claims in the alphabetical nonpriority unsecured claim, list the creditor separately for each clain included in Part 1. If more than one creditor holds a particular claim, claims fill out the Continuation Page of Part 2.	m. For each claim listed, identify what type of claim it is. Do not	list claims already
	Ability Recovery Servi		Total claim
4.1		Last 4 digits of account number 17N1	
	Nonpriority Creditor's Name	_	<u>\$</u> 220.00
	Po Box 4031	When was the debt incurred? 2015	
	Number Street	-	
		As of the date you file, the claim is: Check all that apply.	
	Wyoming PA 18644	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	☑ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	No		
	Yes		
4.2	Concord Servicing Corp	Last 4 digits of account number	\$ <u>5,131.02</u>
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 29352		
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Phoenix AZ 85038 City State ZIP Code	- Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	No		
	Yes Dr Anthony B Cifelli		
4.3	DI AHHOHY D OHUH	Last 4 digits of account number	_{\$} 15.94
	Nonpriority Creditor's Name	When was the debt incurred?	φ ι Ο.Ο-τ
	116 Littletown Rd		
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Morris Plains NJ 07950	- <u> </u>	
	City State ZIP Code	_ ☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	•	Debts to pension or profit-snaring plans, and other similar debts Other. Specify	
	Is the claim subject to offset?		
	☐ Yes		

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Case number (if known)	

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3.	Do any creditors have nonpriority un No. You have nothing to report in the Yes					
4.	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one cre claims fill out the Continuation Page of	ditor separ ditor holds	ately for each clair	 n. For each claim listed, identify wh 	at type of claim it is. Do not	list claims already
	7					Total claim
4.4				_ Last 4 digits of account number	9437	_{\$} 9,874.00
	Nonpriority Creditor's Name Po Box 181145			When was the debt incurred?	2011	\$ 3,07 4.00
	Number Street					
	Arlington	TX	76096-1145	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed		
	Debtor 1 only			Type of NONPRIORITY unsect	ured claim:	
	Debtor 2 only			Student loans		
	Debtor 1 and Debtor 2 only			Obligations arising out of a sepa	ration agreement or divorce	
	At least one of the debtors and another			that you did not report as priority	claims	
	☐ Check if this claim is for a commu	nity debt		☐ Debts to pension or profit-sharin☑ Other. Specify	g plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify		
	☑ No					
	☐ Yes Health Network Labratories					107.00
4.5	Health Network Labratories			Last 4 digits of account number		<u>\$127.00</u>
	Nonpriority Creditor's Name			- When was the debt incurred?		
	1251 S Cedar Crest Blvd #103c Number Street			-		
	Number Street			As of the date you file, the claim	is: Check all that apply.	
	Allentown	PA	18103	Contingent		
	City	State	ZIP Code	Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsec	ured claim:	
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			Obligations arising out of a sepa that you did not report as priority		
	☐ Check if this claim is for a commu	nity debt		Debts to pension or profit-sharin	g plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify		
	✓ No					
	Yes					
4.6	Kay Jewelers/Genesis			Last 4 digits of account number	8401	_{\$} 5,456.00
	Nonpriority Creditor's Name			When was the debt incurred?	2015	ψ <u>σ, .σσ.σσ</u>
	15220 Nw Greenbrier, Ste					
	Number Street			As of the data you file the claim	in. Cheek all that apply	
	Degrades	OB	07006	As of the date you file, the claim	is. Check all that apply.	
	Beaverton City	OR State	97006 ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsect	ured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	u. va vianili	
	At least one of the debtors and another			Obligations arising out of a sepa	ration agreement or divorce	
				that you did not report as priority	claims	
	Check if this claim is for a commu	пиу аерт		Debts to pension or profit-sharin	g plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify		
	V No ☐ Yes					

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Benjamin Powell Sr First Name Middle Name Last Name

Case number ((if known)		

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3.	Do any creditors have nonpriority unsecured ☐ No. You have nothing to report in this part. S ✓ Yes	•	•	
4.	nonpriority unsecured claim, list the creditor sepa	rately for each of	cal order of the creditor who holds each claim. If a creditor has claim. For each claim listed, identify what type of claim it is. Do not im, list the other creditors in Part 3.If you have more than three no	list claims already
	_			Total claim
4.7	Kohls/Capone		Last 4 digits of account number	207.00
	Nonpriority Creditor's Name			\$397.00
	N56 W 17000 Ridgewood Dr		When was the debt incurred? 2018	
	Number Street			
			As of the date you file, the claim is: Check all that apply.	
	Menomonee Falls WI	53051	Contingent	
	City State	ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.		Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce	
			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt		Other. Specify	
	Is the claim subject to offset?		_ , ,	
	✓ No			
4.0	Lehigh Valley Health Networks			. 100 00
4.8	Lenight valley ficality Networks			<u>\$100.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	
	PO Box 781733 Number Street			
	Number Street		As of the date you file, the claim is: Check all that apply.	
	Philadelphia PA	19178	Contingent	
	City State	ZIP Code	Unliquidated	
	Who incurred the debt? Check one.		Disputed	
	☑ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	•		☑ Other. Specify	
	Is the claim subject to offset? V No			
	Yes			
4.9	Lendmark Financial Ser		Last 4 digits of account number 5508	
			When was the debt incurred? 2017	\$ <u>5,469.00</u>
	Nonpriority Creditor's Name		when was the dept incurred?	
	2118 Usher St Nw Number Street		<u> </u>	
	Number Circuit		As of the date you file, the claim is: Check all that apply.	
	Covington GA	30014	Contingent	
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt		that you did not report as priority claims	
	•		 □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify 	
	Is the claim subject to offset? No		S.i.o Spoon,	
	Yes			

Debtor 1

Benjamin Powell Sr First Name Middle Name Last Name

Case number (if known)

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	Do any creditors have nonpriority un No. You have nothing to report in the Yes		_	you? o the court with your other schedules.		
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one creclaims fill out the Continuation Page of	ditor separ ditor holds	ately for each of	claim. For each claim listed, identify wh	at type of claim it is. Do not	list claims already
	1					Total claim
4.10				Last 4 digits of account number	1791	_{\$} 8,600.00
	Nonpriority Creditor's Name			When was the debt incurred?	2017	\$_0,000.00
	Po Box 1010 Number Street				2017	
	Number Circle					
	Evansville	IN	47706	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecu	ured claim:	
	Debtor 1 and Debtor 2 only			Student loans		
	☐ At least one of the debtors and another			Obligations arising out of a separathat you did not report as priority	ration agreement or divorce claims	
	☐ Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing		
	Is the claim subject to offset?			✓ Other. Specify		
	✓ No					
	Yes					45.00
4.11	Pocono Medical Center			Last 4 digits of account number		\$ <u>45.00</u>
	Nonpriority Creditor's Name PO Box 822009			— When was the debt incurred?		
	Number Street			As of the date you file, the claim	is: Check all that apply.	
				Contingent		
	Philadelphia City	PA State	19182 ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	State	ZIF Code	Disputed		
	Debtor 1 only			Type of NONPRIORITY unsecu	ured claim:	
	Debtor 2 only			Student loans		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			☐ Obligations arising out of a separate	ration agreement or divorce	
	At least one of the deptors and another			that you did not report as priority		
	☐ Check if this claim is for a commu	nity debt		☐ Debts to pension or profit-sharing ☐ Other. Specify	g pians, and other similar debts	
	Is the claim subject to offset?			Curer. Specify		
	✓ No					
4 10	Yes					
4.12	Progressive Physicians			Last 4 digits of account number		_{\$} 9.21
	Nonpriority Creditor's Name			When was the debt incurred?		
	95 Highland Ave. Suite 130					
	Number Street			As of the date you file, the claim	is: Check all that apply.	
	Bethlehem	PA	18017	Contingent		
	City Who incurred the debt? Check one.	State	ZIP Code	Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsect	ured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans		
	At least one of the debtors and another			☐ Obligations arising out of a separ	ration agreement or divorce	
	☐ Check if this claim is for a commu	nitu daht		that you did not report as priority	claims	
		mily debt		Debts to pension or profit-sharing	g plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify		
	Yes					

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	3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes						
	nonpriority unsecured claim, list the creditor se	parately for each	tical order of the creditor who holds each claim. If a creditor had claim. For each claim listed, identify what type of claim it is. Do not laim, list the other creditors in Part 3.If you have more than three r	ot list claims already			
4.13	Ray And Flan			Total claim			
4.13	Nonpriority Creditor's Name		Last 4 digits of account number 2035	_{\$} 1,266.00			
	1000 Macarthur Bv		When was the debt incurred? 2016	Ψ			
	Number Street						
	Mahwah NJ	07430	As of the date you file, the claim is: Check all that apply.				
	City State	ZIP Code	Contingent				
	Who incurred the debt? Check one.		Unliquidated				
	Debtor 1 only		☐ Disputed Type of NONPRIORITY unsecured claim:				
	Debtor 2 only		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce				
	Debtor 1 and Debtor 2 only						
	At least one of the debtors and another		that you did not report as priority claims				
	☐ Check if this claim is for a community deb	ot	Debts to pension or profit-sharing plans, and other similar deb	ts			
	Is the claim subject to offset?		✓ Other. Specify				
	✓ No						
	Yes						
4.14	Receivables Management		Last 4 digits of account number 2542	\$ <u>612.00</u>			
	Nonpriority Creditor's Name		When was the debt incurred? 2018				
	1809 N Broadway St						
	Number Street		As of the date you file, the claim is: Check all that apply.				
	Greensburg IN	47240	Contingent				
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated Disputed				
	Debtor 1 only		Type of NONPRIORITY unsecured claim: Student loans				
	Debtor 2 only						
	Debtor 1 and Debtor 2 only		☐ Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another		that you did not report as priority claims				
	☐ Check if this claim is for a community deb	t	Debts to pension or profit-sharing plans, and other similar deb	ts			
	Is the claim subject to offset?		✓ Other. Specify				
	No						
4	Yes						
4.15	St Luke's Physician Group		Last 4 digits of account number	_{\$} 175.00			
	Nonpriority Creditor's Name		When was the debt incurred?	Ψ			
	PO Box 25837						
	Number Street		As of the date you file, the claim is: Check all that apply.				
	Salt Lake City UT	84125	<u> </u>				
	City State	ZIP Code	Contingent Unliquidated				
	Who incurred the debt? Check one.		☐ Unilquidated ☐ Disputed				
	Debtor 1 only						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans				
	At least one of the debtors and another		☐ Obligations arising out of a separation agreement or divorce				
	_		that you did not report as priority claims				
	☐ Check if this claim is for a community deb	Σ	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?		☑ Other. Specify				
	✓ No ☐ Yes						
							

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Case number (if known)

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3.	 Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 					
4.	List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.					
	,				Total claim	
4.16	St Luke's University Health Network			Last 4 digits of account number	C1 00	
	Nonpriority Creditor's Name			When was the debt incurred?	<u>\$61.93</u>	
	801 Ostrum Street Number Street			when was the dept incurred?		
	Number Street					
	Bethlehem	PA	18015	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:				
		Student loans				
	Debtor 1 and Debtor 2 only			☐ Obligations arising out of a separation agreement or divorce		
	At least one of the debtors and another			that you did not report as priority claims		
	☐ Check if this claim is for a communi	ity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			✓ Other. Specify		
	✓ No					
	Yes				E40.00	
4.17	Syncb/Jcp			Last 4 digits of account number 5464	\$ <u>518.00</u>	
	Nonpriority Creditor's Name Po Box 965007			— When was the debt incurred? 2016		
	Number Street			As of the date you file, the claim is: Check all that apply.		
		FL	32896	☐ Contingent ☐ Unliquidated		
	City State ZIP Code Who incurred the debt? Check one.		ZIP Code	☐ Disputed		
	☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
				Student loans		
				☐ Obligations arising out of a separation agreement or divorce		
	At least one of the debtors and another			that you did not report as priority claims		
	☐ Check if this claim is for a community debt			Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other. Specify		
	✓ No					
	Yes					
4.18	Target/Td			Last 4 digits of account number 1841	_{\$} 645.00	
	Nonpriority Creditor's Name			When was the debt incurred? 2017	Ψ	
	Po Box 673					
	Number Street			As of the date you file the claim is Check all that apply		
	Minneapolis	MN	55440	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed		
	Debtor 1 only			<u>'</u>		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			☐ Student loans☐ Obligations arising out of a separation agreement or divorce		
	<u></u>			that you did not report as priority claims		
	☐ Check if this claim is for a communi	ity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			✓ Other. Specify		
	✓ No					
	└ Yes					

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Benjamin Powell Sr First Name Middle Name Last Name

Case number (if)	known)		

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	 Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes 					
 	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separ included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	rately for each claim	i. For each claim listed, identify what	at type of claim it is. Do not	list claims already	
					Total claim	
4.19	Tdrcs/Raymour & Flanig		Last 4 digits of account number		1 000 00	
	Nonpriority Creditor's Name		· ·	2016	\$ <u>1,228.00</u>	
	1000 Macarthur Blvd		When was the debt incurred?	2016		
	Number Street					
	Mahwah NJ	07430	As of the date you file, the claim	is: Check all that apply.		
	City State	ZIP Code	☐ Contingent ☐ Unliquidated			
	Who incurred the debt? Check one.		Disputed			
	Debtor 1 only		Type of NONPRIORITY unsecu	ıred claim:		
	Debtor 2 only		Student loans	iroa olaliii.		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Obligations arising out of a separ	ration agreement or divorce		
	At least one of the debtors and another		that you did not report as priority Debts to pension or profit-sharing			
	☐ Check if this claim is for a community debt		Other. Specify	g plans, and other similar debts		
	Is the claim subject to offset?					
	✓ No Yes					
	res		Last 4 digits of account number		\$	
			When was the debt incurred?		Ψ	
	Nonpriority Creditor's Name					
	Number Street	-	As of the date you file, the claim	is: Check all that apply.		
		-	☐ Contingent			
	City State	ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	ZIF Code	Disputed			
	Debtor 1 only		Type of NONPRIORITY unsecu	ıred claim:		
	Debtor 2 only		Student loans			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		☐ Obligations arising out of a separ	ration agreement or divorce		
	_		that you did not report as priority			
	☐ Check if this claim is for a community debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify			
	Is the claim subject to offset?					
1	☐ No ☐ Yes					
			Last 4 digits of account number		•	
	Nonpriority Creditor's Name		When was the debt incurred?		*	
	Number Street		As of the date you file, the claim	is: Check all that apply.		
			☐ Contingent			
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated			
	Debtor 1 only		Disputed			
	Debtor 2 only		Type of NONPRIORITY unsecu	ıred claim:		
	Debtor 1 and Debtor 2 only		☐ Student loans			
	At least one of the debtors and another		Obligations arising out of a separ			
	☐ Check if this claim is for a community debt		that you did not report as priority	claims		
	·		☐ Debts to pension or profit-sharing☐ Other. Specify	g pians, and other similar debts		
	Is the claim subject to offset? No Yes		<u> —</u> Ошет. Ореону			

Debtor 1

Benjamin Powell Sr First Name Middle Name Last Name

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Kohls/Capone			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			4.7.				
Po Box 3115			Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims				
Number Street	er Street		Part 2: Creditors with Nonpriority Unsecured Claim				
Milwaukee	WI	53201	Last 4 digits of account number 3527				
City	State	ZIP Code					
Syncb/Jcp			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			4 17 4 (0) 4 4 7 7 8 4 9 7 7 7 8 9 7 7 8 9 7 9 9 9 9 9 9 9 9 9				
Po Box 965007			Line $\frac{4.17}{}$ of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims				
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims				
Orlando	FL	32896	Last 4 digits of account number				
City	State	ZIP Code					
Name			On which entry in Part 1 or Part 2 did you list the original creditor?				
vain€			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street							
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
City	State	ZIP Code					
Name			On which entry in Part 1 or Part 2 did you list the original creditor?				
varie			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street			Part 2: Creditors with Nonpriority Unsecured				
			Claims Claims				
City	State	ZIP Code	Last 4 digits of account number				
- ,			On which andmain Dant 4 on Dant 9 did you list the animinal anaditan?				
Name			On which entry in Part 1 or Part 2 did you list the original creditor?				
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Street							
3.330			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
City	State	ZIP Code	East 7 digits of account number				
			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			Line of (Check and) Depth (Conditions 1915)				
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
- Subst			Part 2: Creditors with Nonpriority Unsecured Claims				
			Look & divide of account number				
City	State	ZIP Code	Last 4 digits of account number				
			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name			<u>_</u>				
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				

First Name Middle Name Last Name Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	150.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	150.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	39,950.10
	6j. Total. Add lines 6f through 6i.	6j.	\$	39,950.10

Fill in this information to identify your case:							
Debtor	Benjamin Powell Sr						
20210.	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse If filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the Middle District of Pennsylvania							
Case number (If known)							

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with wh	om you	have the contract or lease	State what the contract or lease is for
2.1	Concord Servicing Corp			Timeshare
	Name PO BOx 29352			Lessee Timeshare
	Street Phoenix	AZ	85038	
	City	State	ZIP Code	
2.2	RP Management, Inc			Residential Lease Lessee
	Name 92-105 Wavery Drive			
	Street			
	Stroudsburg	PA	18360	
	City	State	ZIP Code	
2.3				<u></u>
	Name			
	Street			
	City	State	ZIP Code	
2.4	·			
	Name			
	Street			
	City	State	ZIP Code	
2.5	,			
	Name			<u> </u>
	Street			_
	City	State	ZIP Code	

Fill ir	n this in	formation t	o identify y	our case:				
		Benjamin P	owell Sr					
Debto	or 1	First Name		Middle Name		Last Name		
Debto (Spous) First Name		Middle Name		Last Name		
United	d States	Bankruptov Co	ourt for the: M	iddle District of P	ennsvlvani	a		
	number							
(If kno						_		Check if this is ar
								amended filing
Offic	cial F	orm 10	06H					
Sch	nedu	ıle H:	Your	Codebt	ors			12/15
are filli and nu case n	ng toge umber t umber o you h No Yes Vithin the rizona,	ether, both a he entries in (if known) ave any coone lest 8 year California, logo to line 3.	re equally in the boxes Answer even lebtors? (If rs, have yo aho, Louisia	responsible for on the left. At ery question. you are filing a	r supplyitach the	ng correct in Additional P e, do not list e property sta	either spouse te or territor	e as complete and accurate as possible. If two married people f more space is needed, copy the Additional Page, fill it out, page. On the top of any Additional Pages, write your name and as a codebtor.) Ty? (Community property states and territories include ashington, and Wisconsin.) e?
	\square N	0						
	Y	es. In which	community	state or territory	y did you	live?		Fill in the name and current address of that person.
	Ī	lame of your spo	ouse, former spo	ouse, or legal equiva	alent			_
	_							_
	١	lumber S	Street					
	7	City		State			ZIP Code	_
sl S	hown ir <i>chedul</i>	n line 2 agai e <i>D</i> (Official	n as a code Form 106D	btor only if the	at persor /F (Officia	is a guaran	tor or cosigi	or if your spouse is filing with you. List the person ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D,
	Column	1: Your cod	lebtor					Column 2: The creditor to whom you owe the debt
								Check all schedules that apply:
3.1	Ruth	Ramos						Schedule D, line 2.1
	Name							Schedule E/F, line
	Street							Schedule G, line
2 2	City				State		ZIP Code	
3.2	Name							Schedule D, line
	Name							Schedule E/F, line
	Street							Schedule G, line
	City			5	State		ZIP Code	
3.3								
	Name							Schedule D, line
	Street							Schedule E/F, line Schedule G, line
								Scriedule O, IIIIe
	City			5	State		ZIP Code	

Fill in this information to identify	your case:						
Benjamin Powe	II Sr						
First Name Debtor 2	Middle Name	Last Name	-				
(Spouse, if filing) First Name	Middle Name	Last Name	_				
United States Bankruptcy Court for the:	Middle District of Pennsylva	ania ,					
Case number(If known)	-		Check if th				
			_	ended filing lement showing postpetition chapter 13			
				as of the following date:			
Official Form 106I			MM / DE	D/ YYYY			
Schedule I: You	ır Income			12/15			
supplying correct information. If yo	ou are married and not filingse is not filingse is not filing with you, detop of any additional page	ng jointly, and your spo o not include informati	ouse is living with yo on about your spou	r 2), both are equally responsible for ou, include information about your spouse. se. If more space is needed, attach a nown). Answer every question.			
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse			
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ✓ Not employed		Employed Not employed			
Include part-time, seasonal, or self-employed work.							
Occupation may include student or homemaker, if it applies.	Occupation						
	Employer's name						
	Employer's address	Number Street		Number Street			
		City State	ZIP Code	City State ZIP Code			
	How long employed there	•	5555	S., State I., State			
Part 2: Give Details About							
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse habelow. If you need more space, a	ave more than one employer	, combine the informatio		te \$0 in the space. Include your non-filing r that person on the lines			
below. If you need more space, a	ttacii a separate sheet to this	S IOIIII.	For Debtor 1	For Debtor 2 or non-filing spouse			
List monthly gross wages, sale deductions). If not paid monthly,			\$	\$			
3. Estimate and list monthly over	time pay.	3.	+\$	+ \$			
4. Calculate gross income. Add li	ne 2 + line 3.	4.	\$	\$			

Middle Name

Last Name

Case number (if known)_

			Fo	r Debtor 1		For Debtor 2 o	r
					<u>r</u>	າon-filing spoເ	use
Co	py line 4 here	→ 4.	\$_			\$	
. Lis	t all payroll deductions:						
5	a. Tax, Medicare, and Social Security deductions	5a.	\$_			\$	
51	o. Mandatory contributions for retirement plans	5b.	\$_			\$	
5	Voluntary contributions for retirement plans	5c.	\$			\$	
	d. Required repayments of retirement fund loans	5d.	\$			\$	
5	e. Insurance	5e.	\$			\$	
51	Domestic support obligations	5f.	\$		•	\$	
			\$		•	\$	
	g. Union dues	5g. 5h.	т <u> </u>			•	
31	n. Other deductions. Specify:	511.			+	\$ \$	
_			ֆ_ \$			\$	
-			Ψ_ \$			\$	
_		_	-			*	
	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	-			\$	
. С	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_			\$	
Li	st all other income regularly received:						
	a. Net income from rental property and from operating a business,						
	profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			0.00			
	monthly net income.	8a.	\$_			\$	
8	b. Interest and dividends	8b.	\$_	0.00		\$	
8	c. Family support payments that you, a non-filing spouse, or a dependent	ent					
	regularly receive Include alimony, spousal support, child support, maintenance, divorce			0.00			
	settlement, and property settlement.	8c.	\$_	0.00		\$	
8	d. Unemployment compensation	8d.	\$_	0.00		\$	
8	e. Social Security	8e.	\$_	2,140.00		\$	
8	f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) of any non-cash assistant	nce					
	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$_	0.00		\$	
8	g. Pension or retirement income	8g.	\$	3,930.00		\$	
		_	Ψ_	0.00		٧	
8	h. Other monthly income. Specify:	8h.	+ \$_		. –	+\$	
Α	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	6,070.00		\$	
Ca	Iculate monthly income. Add line 7 + line 9.			0.070.00	ĪĒ		
	Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	6,070.00	+	\$	
S t	ate all other regular contributions to the expenses that you list in <i>Sche</i> e	dula	,				
	clude contributions from an unmarried partner, members of your household, v			dents vour roo	omma	tes and other	
	ends or relatives.	,		, , , , , , , , , , , , , , , , , , ,			
Do	not include any amounts already included in lines 2-10 or amounts that are	not a	vailabl	e to pay expe	nses	listed in <i>Sched</i> u	ule J.
Sp	ecify:						11.
2. A (dd the amount in the last column of line 10 to the amount in line 11. The	e resu	It is the	e combined m	onthly	/ income.	
			ical In	formation if it	annli	es	12.
	rite that amount on the Summary of Your Assets and Liabilities and Certain S	Statist	icai iii	ioiiiialioii, ii il	appli		
	rite that amount on the Summary of Your Assets and Liabilities and Certain S	Statist	icai iii	ioiiiialioii, ii il	аррік		
W <u>.</u> <u>.</u>	o_you expect an increase or decrease within the year after you file this			ionnation, ii it	аррік		
W <u>.</u> <u>.</u>				ioimauon, ii ii	арріі		

Fill in this information to identify yo	our case:			
Benjamin Powell Sr				
Debtor 1 First Name	Middle Name Last Name	Check if this i	s:	
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	——— An amend	•	
	iddle District of Pennsylvania			tpetition chapter 13
	, (S	expenses	as of the followin	g date:
Case number(If known)		MM / DD / `	YYYY	
Official Form 106J				
Schedule J: You	r Expenses			12/15
Be as complete and accurate as possinformation. If more space is needed (if known). Answer every question.				-
Part 1: Describe Your House	ehold			
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a sepon a sepo	oarate household? Official Form 106J-2, <i>Expenses for S</i>	eparate Household of Debtor 2.		
2. Do you have dependents?	No			
	Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2.	each dependent			\square_{No}
Do not state the dependents' names.				Yes
				No
				Yes
				No
				Yes
				□No □Vaa
				Yes
				Yes
expenses of people office than	☑ _{No} ☑ Yes			
yourself and your dependents?				
Part 2: Estimate Your Ongoing	g Monthly Expenses			
Estimate your expenses as of your b expenses as of a date after the bankr applicable date.		•	-	•
Include expenses paid for with non-c	ash government assistance if you	know the value of		
such assistance and have included in	t on Schedule I: Your Income (Offic	cial Form 106l.)	Your exp	enses
 The rental or home ownership expany rent for the ground or lot. 	penses for your residence. Include	first mortgage payments and	4. \$	805.00
If not included in line 4:				0.00
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or ren	ter's insurance		4b. \$	55.00
4c. Home maintenance, repair, an	d upkeep expenses		4c. \$	25.00
4d. Homeowner's association or c	ondominium dues		4d. \$	0.00

Benjamin Powell Sr

Debtor 1

First Name Middle Name Last Name Case number (if known)_

			Your ex	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	106.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	275.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	150.00
10.	Personal care products and services	10.	\$	150.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	235.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	100.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	165.00
	15d. Other insurance. Specify:	15d.	\$	0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	511.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e Homeowner's association or condominium dues	20e	\$	0.00

Debtor 1	Benjamin Powell Sr First Name Middle Name Last Name Case number (# k	nown)		
21. Other . §	specify: Storage Unit	21.	+\$ +\$	85.00
	te your monthly expenses.		+\$	
22a. Ad	I lines 4 through 21.	22a.	\$	2,985.00
22b. Co	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a	22b.	\$	
and 22b	The result is your monthly expenses.	22c.	\$	2,985.00
	your monthly net income.		\$	6,070.00
	py line 12 (your combined monthly income) from Schedule I. py your monthly expenses from line 22c above.	23a. 23b.	- \$	2,985.00
	otract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .	23c.	\$	3,085.00
24. Do you e	xpect an increase or decrease in your expenses within the year after you file this form?			
For exam	ple, do you expect to finish paying for your car loan within the year or do you expect your			

Fill in this in	formation to ide	entify your case:		
Debtor 1	Benjamin Po	owell Sr Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court fo	or the Middle District of Penr	nsylvania	
Case number (If known)				

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	re read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I hav t they are true and correct.	re read the summary and schedules filed with this declaration and
	re read the summary and schedules filed with this declaration and
	re read the summary and schedules filed with this declaration and

Fill in this infor	rmation to ident	ify your case:		
Debtor 1 Be	enjamin Powell S	Gr		
	rst Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) Fir	rst Name	Middle Name	Last Name	
United States Ban Case number (If known)	nkruptcy Court for th	ne: Middle District of Penns	ylvania	

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1. What is your current Married Not married	t marital status?			
☑ No	e places you lived in the last 3 ye			
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Str	eet	From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
City	State ZIP Code		City State ZIP Code	
Number Str	eet	From To	Number Street	Same as Debtor 1 From To
City	State ZIP Code		City State ZIP Code	2
and territories include No	ars, did you ever live with a spo e Arizona, California, Idaho, Loui you fill out <i>Schedule H: Your Cod</i>	siana, Nevada, Nev	alent in a community property state or territory? (of which we will be with the weak of the wild be with the wild be wild	community property states onsin.)

	,	
Eirct	Mama	

- 1	aet	NI:	am	۵	

Case number	(if known)		

Part 2: Explain the Sources of Your Income

If you are filing a joint case No	and you have into	me that you receive			
Yes. Fill in the details.					
		Debtor 1		Debtor 2	
		Sources of income Check all that apply		Sources of income nd Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of cu the date you filed for	•	✓ Wages, commi bonuses, tips✓ Operating a but	\$ <u>0.00</u>	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar yea	er 31, <u>2017</u>)	✓ Wages, commin bonuses, tips✓ Operating a but	\$ <u>0.00</u>	Wages, commissions, bonuses, tips Operating a business	\$
For the calendar year		✓ Wages, commi bonuses, tips✓ Operating a bu	\$ 0.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
and other public benefit paywinnings. If you are filing a List each source and the grant No	yments; pensions; joint case and you	ome is taxable. Exa rental income; inter have income that y	rest; dividends; money colle you received together, list it	alimony; child support; Social sected from lawsuits; royalties; a only once under Debtor 1.	
and other public benefit pay winnings. If you are filing a List each source and the gr	yments; pensions; joint case and you ross income from e	ome is taxable. Exa rental income; inter have income that y ach source separat	amples of other income are rest; dividends; money colle rou received together, list it	alimony; child support; Social sected from lawsuits; royalties; all only once under Debtor 1. that you listed in line 4.	
and other public benefit pay winnings. If you are filing a List each source and the gi	yments; pensions; joint case and you ross income from e	ome is taxable. Exarental income; inter have income that y ach source separate of income that y ach source separate of income that y below.	amples of other income are rest; dividends; money colle rou received together, list it	alimony; child support; Social sected from lawsuits; royalties; a only once under Debtor 1.	Gross income from each source
and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details.	yments; pensions; joint case and you ross income from e Debtor 1	ome is taxable. Exarental income; inter have income that y ach source separate of income that y below.	amples of other income are rest; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions)	alimony; child support; Social sected from lawsuits; royalties; all only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
and other public benefit paywinnings. If you are filing a List each source and the grand No Yes. Fill in the details.	yments; pensions; joint case and you ross income from e Debtor 1	ome is taxable. Exarental income; inter have income that y ach source separate of income that y is of income to below.	amples of other income are est; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions)	alimony; child support; Social sected from lawsuits; royalties; al only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
and other public benefit pay winnings. If you are filing a List each source and the graph No Yes. Fill in the details. The sum of t	yments; pensions; joint case and you ross income from e Debtor 1	ome is taxable. Exarental income; inter have income that y ach source separate soft income below.	amples of other income are est; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions)	alimony; child support; Social sected from lawsuits; royalties; all only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
and other public benefit paywinnings. If you are filing a List each source and the grand No No Yes. Fill in the details. The January 1 of current runtil the date you at for bankruptcy:	yments; pensions; joint case and you ross income from e Debtor 1 Sources Describe	ome is taxable. Exarental income; inter have income that y ach source separate of income separate sepa	amples of other income are est; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions)	alimony; child support; Social sected from lawsuits; royalties; al only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$
and other public benefit paywinnings. If you are filing a List each source and the graph No No Yes. Fill in the details. m January 1 of current runtil the date you defor bankruptcy: last calendar year: uary 1 to	yments; pensions; i joint case and you ross income from e Debtor 1 Sources Describe	ome is taxable. Exarental income; inter have income that y ach source separate of income of the below.	amples of other income are est; dividends; money colle you received together, list it tely. Do not include income Gross income from each source before deductions and exclusions)	alimony; child support; Social sected from lawsuits; royalties; al only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$
and other public benefit paywinnings. If you are filing a List each source and the graph of the property of th	yments; pensions; ipoint case and you ross income from e Debtor 1 Sources Describe Social Security Veterans	ome is taxable. Exarental income; inter have income that y ach source separate	amples of other income are rest; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions) 25,680.00 26,880.00 26,880.00	alimony; child support; Social sected from lawsuits; royalties; al only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$
and other public benefit paywinnings. If you are filing a List each source and the graph of the paywinnings. If you are filing a List each source and the graph of the paywinning of the details. The paywinning of the paywinning of the details of the paywinning of	yments; pensions; ipoint case and you ross income from e Debtor 1 Sources Describe Social Security Veterans	ome is taxable. Exarental income; inter have income that y ach source separate of income source separate sourc	amples of other income are est; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions) 0.00 16,380.00 26,880.00 0.00	alimony; child support; Social sected from lawsuits; royalties; al only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$
and other public benefit paywinnings. If you are filing a List each source and the grant No	yments; pensions; ipoint case and you ross income from e Debtor 1 Sources Describe Social Security Veterans	ome is taxable. Exarental income; inter have income that y ach source separate	amples of other income are est; dividends; money colle you received together, list it tely. Do not include income Gross income from each source (before deductions and exclusions) 0.00 16,380.00 26,880.00 0.00	alimony; child support; Social sected from lawsuits; royalties; al only once under Debtor 1. that you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$

Last Name

Part 3:	List Certain Pay	ments You	Made Before	e You Filed	for Bankruptcy		
6. Are eith	her Debtor 1's or De	ebtor 2's deb	ts primarily co	nsumer debt	ts?		
☐ No.	"incurred by an ind	lividual prima	rily for a person	al, family, or h	ebts. Consumer debts ar nousehold purpose." ay any creditor a total of	e defined in 11 U.S.C. § 101 \$6,425* or more?	(8) as
	□ No. Go to line	-	·	3, 3 1	, ,	,	
	the total amo	unt you paid t	hat creditor. Do	not include p	\$6,425* or more in one ayments for domestic suments to an attorney for t	pport obligations, such as	
	* Subject to adjust	ment on 4/01	/19 and every 3	years after th	nat for cases filed on or a	after the date of adjustment.	
✓ Yes	s. Debtor 1 or Debto	or 2 or both h	nave primarily of	consumer de	bts.		
			-		ay any creditor a total of	\$600 or more?	
	☐ No. Go to line	7					
	creditor. [Do not include	payments for o	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy ca		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Ally				\$ 2,000.00	\$ 29,056.00	Пист
	Creditor's Name				Ψ,σσσσσσ	Ψ_==,σ=====	☐ Mortgage ☑ Car
	PO Box 900						Credit card
	Number Street	t					Loan repayment
							Suppliers or vendors
	Louisville	KY	40290				Other
	City	State	ZIP Code				Other
	Internal Reve	enue Service			\$ <u>689.00</u>	\$_0.00	☐ Mortgage
		40					☐ Car
	P.O. Box 73-						Credit card
							Loan repayment
							☐ Suppliers or vendors
	Philadelphia City	PA State	19101-73 ZIP Code				✓ Other
	City	State	ZIP Code				
	Overdite de Name				\$	\$	☐ Mortgage
	Creditor's Name						☐ Car
	Number Street	<u> </u>					Credit card
							Loan repayment
							Suppliers or vendors
	0:4	04-1	710.0				Other
	City	State	ZIP Code				

Benjamin Powell Sr Debtor 1 Case number (if known) Last Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ✓ No Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid Insider's Name Number Street City State ZIP Code Insider's Name Number Street State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. ✓ No ☐ Yes. List all payments that benefited an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe Include creditor's name Insider's Name Number Street ZIP Code City State Insider's Name

Official Form 107

City

Number Street

State

ZIP Code

First Name

Mid	dla	NIC	-	_	

ī	act	NI	m	0			

Case number (if known)	
------------------------	--

List all such matters, including personal injur- and contract disputes.	cy, were you a party in any lawsuit, y cases, small claims actions, divorce				
☐ No ☐ Yes. Fill in the details.					
	Nature of the case	Court or agency	,		Status of the case
Lendmark Financial Services v. Case title: Benjamin Powell	Credit Card; Date filed: 10/01/2018	T		al District Court -	Pending On appeal
		PO Box 736 Number Street			Concluded
Case number MJ-43303-CV-0000269-2018		Tannersville City	PA State	18372 ZIP Code	
Case title:		Court Name			Pending On appeal
		Number Street			Concluded
Case number		City	State	ZIP Code	
 Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. 		sessed, foreclos	ed, garnis	shed, attached, s	eized, or levied?
Check all that apply and fill in the details below. No. Go to line 11.		sessed, foreclos	ed, garnis	Date	eized, or levied? Value of the property
Check all that apply and fill in the details below. No. Go to line 11.	ow.	sessed, foreclos	ed, garnis		
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.	Describe the property Explain what happened		ed, garnis		Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Explain what happened Property was repose Property was forecle	sessed.	ed, garnis		Value of the property
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Explain what happened Property was repos Property was garnis	sessed. osed.			Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what happened Property was repos Property was garnis	sessed. osed.			Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Describe the property Explain what happened Property was repos Property was forecle Property was garnis Property was attach	sessed. osed.		Date	Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State ZIP 0	Describe the property Explain what happened Property was repos Property was forecle Property was garnis Property was attach	sessed. osed.		Date	Value of the property \$ Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name City State ZIP C	Explain what happened Property was reposed Property was garnised Property was attach Describe the property Explain what happened Property was attach Describe the property Property was reposed Property was attach	sessed. osed. ihed. ed, seized, or levi		Date	Value of the property \$ Value of the property
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor's Name City State ZIP Common State ZIP	Explain what happened Property was repos Property was forecle Property was garnis Property was attach Describe the property Explain what happened	sessed. osed. ed, seized, or levi		Date	Value of the property \$ Value of the property

No			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
	Describe the action the creditor took	was taken	Amount
Creditor's Name			
		9	\$
Number Street			Ψ
City State ZIP Code	Last 4 digits of account number: XXXX-		
nin 1 year before you filed for bankrupto	cy, was any of your property in the possession of	an assignee for the benefit of	of
litors, a court-appointed receiver, a cus	stodian, or another official?		
No			
Yes			
Liet Contain Cifts and Contains	*iono		
List Certain Gifts and Contribu	tions		
	tcy, did you give any gifts with a total value of mo	re than \$600 per person?	
No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Describe the gifts		Value
	Describe the gifts		Value
per person	Describe the gifts		Value
per person	Describe the gifts		Value \$ \$
per person	Describe the gifts		Value \$\$
per person	Describe the gifts		Value \$\$
Person to Whom You Gave the Gift Number Street	Describe the gifts		Value \$\$
per person Person to Whom You Gave the Gift	Describe the gifts		\text{Value} \$
Person to Whom You Gave the Gift Number Street	Describe the gifts		\text{Value} \$
Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts		\text{Value} \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts	Dates you gave	Value \$ \$ Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you		the gifts	\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		Dates you gave	\$\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		Dates you gave	\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$\$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person		Dates you gave	\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		Dates you gave	\$

16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you
	consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No	

Yes. Fill in the details.

ARM Lawyers	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid 18 N 8th Street Number Street			\$ 3,000.00
Stroudsburg PA 18360 City State ZIP Code			\$
Email or website address			
Person Who Made the Payment, if Not You			

Benjamin	Powell Sr		Case number (if known)
First Name	Middle Name	Last Name	

	Description and value of any property	r transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			\$
Number Street	-			\$
City State ZIP Code	-			
Email or website address	_			
Person Who Made the Payment, if Not You				
Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that No Yes. Fill in the details.	itors or to make payments to your cre		ier any property to	anyone who
	Description and value of any property	r transferred	Date payment or transfer was made	Amount of payme
Person Who Was Paid	-			\$
Number Street	-			*
	-			\$
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have	r business or financial affairs? made as security (such as the granting			
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you ha	r business or financial affairs? made as security (such as the granting ave already listed on this statement.	of a security interest or m	ortgage on your prop	perty).
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have	r business or financial affairs? made as security (such as the granting		ortgage on your prop	perty).
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your prop	Date transfer
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have the No Yes. Fill in the details.	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your prop	Date transfer
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have No Yes. Fill in the details.	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property	ortgage on your prop	Date transfer
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property	ortgage on your prop	Date transfer
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property	ortgage on your prop	Date transfer
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property	ortgage on your prop	Date transfer
City State ZIP Code Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers Do not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property	ortgage on your prop	Date transfer

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Last Name

	nin 10 years before you filed for bankrup a beneficiary? (These are often called ass		y to a self-	settled trust o	or similar device of wh	iich you
	No Yes. Fill in the details.					
		Description and value of the prope	rty transferr	ed		Date transfer was made
	Name of trust					
20. With	List Certain Financial Accounts					enefit,
Incl brol	sed, sold, moved, or transferred? ude checking, savings, money market, o kerage houses, pension funds, cooperat No Yes. Fill in the details.				s in banks, credit unio	ons,
		Last 4 digits of account number	Type of a instrume	ccount or nt	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Institution	xxxx	Check	_		\$
	Number Street			y market		
-	City State ZIP Code		UOther	·		
	Name of Financial Institution	XXXX	Check Savin	_		\$
	Number Street		Mone Broke	y market erage		
	City State ZIP Code		Other	·		
sec	you now have, or did you have within 1 y urities, cash, or other valuables? No Yes. Fill in the details.	ear before you filed for bankrup	tcy, any sa	fe deposit bo	x or other depository	for
		Who else had access to it?		Describe the	contents	Do you still have it?
	Name of Financial Institution	Name				No Yes
	Number Street	Number Street				
	City State 7ID Code	City State ZIP Code				

Yes. Fill in the details.			
	Who else has or had access to it?	Describe the contents	Do you st have it?
			По
Name of Storage Facility	Name	—	Yes
Number Street	Number Street		
	City State ZIP Code	—	
City State ZIP	Code		
9: Identify Property You	Hold or Control for Someone Else		
o you hold or control any property hold in trust for someone. No Yes. Fill in the details.	y that someone else owns? Include any prope		
	Where is the property?	Describe the property	Value
Owner's Name			\$
Owner 3 Name	Number Street		Ψ
Number Street	Number Street		
City State ZIP	City State ZIP Code	•	
10: Give Details About Er	nvironmental Information		
ne purpose of Part 10, the following	ng definitions apply:		
azardous or toxic substances, wa	ral, state, or local statute or regulation concer istes, or material into the air, land, soil, surfact controlling the cleanup of these substances, wa	e water, groundwater, or other medi	
ite means any location, facility, or or used to own, operate, or utilize	property as defined under any environmental e it, including disposal sites.	law, whether you now own, operate	, or utilize
· · · · · · · · · / · [· · · · · / · · · ·		s waste, hazardous substance, toxic	;
azardous material means anything	g an environmental law defines as a hazardou Ilutant, contaminant, or similar term.		
azardous material means anything ubstance, hazardous material, pol	•	,	
azardous material means anything ubstance, hazardous material, pol	edings that you know about, regardless of wh	nen they occurred.	nental law?
azardous material means anything ubstance, hazardous material, pol	llutant, contaminant, or similar term.	nen they occurred.	nental law?
azardous material means anything ubstance, hazardous material, polurt all notices, releases, and process any governmental unit notified	Ollutant, contaminant, or similar term. Deedings that you know about, regardless of wh You that you may be liable or potentially liable	nen they occurred.	
azardous material means anything ubstance, hazardous material, polurt all notices, releases, and process any governmental unit notified	Ollutant, contaminant, or similar term. Deedings that you know about, regardless of wh You that you may be liable or potentially liable	nen they occurred. under or in violation of an environm	
azardous material means anything ubstance, hazardous material, polurt all notices, releases, and process any governmental unit notified	Ollutant, contaminant, or similar term. Deedings that you know about, regardless of wh You that you may be liable or potentially liable	nen they occurred. under or in violation of an environm	
azardous material means anything ubstance, hazardous material, polert all notices, releases, and process any governmental unit notified No Yes. Fill in the details.	Blutant, contaminant, or similar term. Redings that you know about, regardless of who You that you may be liable or potentially liable Governmental unit	nen they occurred. under or in violation of an environm	Date of notice

Last Name

25. Have you notified any governmental	unit of any release of hazardous mat	erial?	
☑ No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_	
Number Street	Number Street		
	City State ZIP Code	3	
City State ZIP C	Code		
26. Have you been a party in any judicial	or administrative proceeding under	any environmental law? Include settlement	s and orders.
☑ No		•	
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
Case title			
	Court Name		☐ Pending
			☐ On appeal
	Number Street		Concluded
Case number	City State ZII	² Code	
	ur Business or Connections to		b
	ankruptcy, did you own a business o loyed in a trade, profession, or other	r have any of the following connections to a activity, either full-time or part-time	iny business?
	y company (LLC) or limited liability p	-	
A partner in a partnership	do		
	ging executive of a corporation e voting or equity securities of a corp	undi ou	
		oration	
✓ No. None of the above applies. G✓ Yes. Check all that apply above a	io to Part 12. and fill in the details below for each b	uisiness	
	Describe the nature of the bus		n number
Business Name		Do not include Social	Security number or ITIN.
		EIN:	
Number Street		Dates business existe	d
	Name of accountant or bookke		u
		From	То
City State ZIP C			
	Describe the nature of the bus	• •	n number Security number or ITIN.
Business Name		,	
Number Street		EIN:	
		Dates business existe	d
	Name of accountant or bookke	-	To
City State 7ID (Nada	From	То

\neg	htor	1	

First Name Middle Name Last Name	
Benjamin Powell Sr Case number (if known)	

		Describe the nature of the business	Employer Identification number
	Business Name		Do not include Social Security number or ITIN.
	230000		EIN:
	Number Street		Dates business existed
		Name of accountant or bookkeeper	From To
	City State ZIP C	Code	
	in 2 years before you filed for ba tutions, creditors, or other partic	ankruptcy, did you give a financial statement to anyo es.	ne about your business? Include all financial
_	lo /es. Fill in the details below.		
		Date issued	
	Mana		
	Name	MM / DD / YYYY	
	Number Street		
			
	City State ZIP C	Code	
	City State ZIP C	Code	
	City State ZIP C	Code	
		Code Code	
Part 12		Code	
I ha ans in c	2: Sign Below ave read the answers on this Sta	ntement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing p use can result in fines up to \$250,000, or imprisonme	roperty, or obtaining money or property by fraud
l ha ans in c	Sign Below ave read the answers on this <i>Sta</i> swers are true and correct. I und connection with a bankruptcy ca U.S.C. §§ 152, 1341, 1519, and 38	ntement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing p use can result in fines up to \$250,000, or imprisonme	roperty, or obtaining money or property by fraud
I ha ans in c	2: Sign Below ave read the answers on this Sta swers are true and correct. I und connection with a bankruptcy ca	ntement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing p use can result in fines up to \$250,000, or imprisonme	roperty, or obtaining money or property by fraud
I ha ans in c 18	Sign Below ave read the answers on this Sta swers are true and correct. I und connection with a bankruptcy ca: U.S.C. §§ 152, 1341, 1519, and 38 Y/s/ Benjamin Powell Sr Signature of Debtor 1	ntement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing pase can result in fines up to \$250,000, or imprisonme 571.	roperty, or obtaining money or property by fraud
I ha ans in c 18	Sign Below ave read the answers on this States are true and correct. I und connection with a bankruptcy cast. U.S.C. §§ 152, 1341, 1519, and 38 of States are true and correct. I und connection with a bankruptcy cast. U.S.C. §§ 152, 1341, 1519, and 38 of States are true and correct. I und states are true and correct are true are true are true and correct are true	itement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing place can result in fines up to \$250,000, or imprisonme 571. Signature of Debtor 2	roperty, or obtaining money or property by fraud int for up to 20 years, or both.
I ha ans in c 18	2: Sign Below ave read the answers on this Statewers are true and correct. I und connection with a bankruptcy cau. U.S.C. §§ 152, 1341, 1519, and 38 of Statement Statement Signature of Debtor 1 Date 11/27/2018 I you attach additional pages to No	ntement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing pase can result in fines up to \$250,000, or imprisonme 571.	roperty, or obtaining money or property by fraud nt for up to 20 years, or both.
I ha ans in c 18	Sign Below ave read the answers on this States are true and correct. I und connection with a bankruptcy cast. U.S.C. §§ 152, 1341, 1519, and 38 and 15 and	itement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing place can result in fines up to \$250,000, or imprisonme 571. Signature of Debtor 2	roperty, or obtaining money or property by fraud nt for up to 20 years, or both.
I ha ans in c 18	Pare read the answers on this States were are true and correct. I und connection with a bankruptcy care. U.S.C. §§ 152, 1341, 1519, and 38 of States of Stat	itement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing place can result in fines up to \$250,000, or imprisonme 571. Signature of Debtor 2	roperty, or obtaining money or property by fraud int for up to 20 years, or both.
Did	Sign Below ave read the answers on this Statewers are true and correct. I undependent on with a bankruptcy cast. U.S.C. §§ 152, 1341, 1519, and 38 a	stement of Financial Affairs and any attachments, and lerstand that making a false statement, concealing place can result in fines up to \$250,000, or imprisonme 571. Signature of Debtor 2 Date Your Statement of Financial Affairs for Individuals Financial Affairs for I	roperty, or obtaining money or property by fraud int for up to 20 years, or both.

Ability Recovery Servi Po Box 4031 Wyoming, PA 18644

Ally PO Box 9001951 Louisville, KY 40290

Concord Servicing Corp PO Box 29352 Phoenix, AZ 85038

Concord Servicing Corp PO BOx 29352 Phoenix, AZ 85038

Dr Anthony B Cifelli 116 Littletown Rd Morris Plains, NJ 07950

Gmfnancial Po Box 181145 Arlington, TX 76096-1145

Health Network Labratories 1251 S Cedar Crest Blvd #103c Allentown, PA 18103

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Kay Jewelers/Genesis 15220 Nw Greenbrier, Ste Beaverton, OR 97006

Kohls/Capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Kohls/Capone Po Box 3115 Milwaukee, WI 53201

Lehigh Valley Health Networks PO Box 781733 Philadelphia, PA 19178

Lendmark Financial Ser 2118 Usher St Nw Covington, GA 30014 Onemain Po Box 1010 Evansville, IN 47706

Pennsylvania Department of Revenue PO Box 281041 Harrisburg, PA 17128

Pocono Medical Center PO Box 822009 Philadelphia, PA 19182

Progressive Physicians 95 Highland Ave. Suite 130 Bethlehem, PA 18017

RP Management, Inc 92-105 Wavery Drive Stroudsburg, PA 18360

Ray And Flan 1000 Macarthur Bv Mahwah, NJ 07430

Receivables Management 1809 N Broadway St Greensburg, IN 47240

Ruth Ramos

St Luke's Physician Group PO Box 25837 Salt Lake City, UT 84125

St Luke's University Health Network 801 Ostrum Street Bethlehem, PA 18015

Syncb/Jcp Po Box 965007 Orlando, FL 32896

Target/Td Po Box 673 Minneapolis, MN 55440

Tdrcs/Raymour & Flanig 1000 Macarthur Blvd Mahwah, NJ 07430

United States Bankruptcy Court Middle District of Pennsylvania

In re:	Benjamin Powell Sr	Case No.
	Debtor(s)	Chapter 13
	Verificatio	on of Creditor Matrix
	The above-named Debtor(s) he do correct to the best of their kno	reby verify that the attached list of creditors is owledge.
Date: _	11/27/2018	/s/ Benjamin Powell Sr Signature of Debtor
		Signature of Joint Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$04 E	filing too
\$∠45	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢210	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Notice Required by 11 U.S.C. U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

required;

adjourned hearings thereof;

United States Bankruptcy Court

Middle District of Pennsylvania

Iı	n re Benjamin Powell Sr	
		Case No
D	ebtor	Chapter ¹³
	DISCLOSURE OF COMPENSATION OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify the above named debtor(s) and that compensation paid to me within one y petition in bankruptcy, or agreed to be paid to me, for services rendered the debtor(s) in contemplation of or in connection with the bankruptcy	ear before the filing of the d or to be rendered on behalf of
<u>F</u>	LAT FEE	
	For legal services, I have agreed to accept	\$_3,000.00
	Prior to the filing of this statement I have received	
	Balance Due	\$_0.00
R	ETAINER	
	For legal services, I have agreed to accept a retainer of	\$
	The undersigned shall bill against the retainer at an hourly rate of	\$
	[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all approved fees and expenses exceeding the amount of the retainer.	Court
2.	The source of the compensation paid to me was: Debtor Other (specify)	
3.	The source of compensation to be paid to me is: Debtor Other (specify)	
4.	I have not agreed to share the above-disclosed compensation with are members and associates of my law firm.	h any other person unless they
	I have agreed to share the above-disclosed compensation with a ce not members or associates of my law firm. A copy of the Agreement, to the people sharing the compensation is attached.	
5.	In return of the above-disclosed fee, I have agreed to render legal service bankruptcy case, including:	ce for all aspects of the
	a. Analysis of the debtor's financial situation, and rendering advice to whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statements of affair	-

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any

E	32030 (Form	2030) (12/15)				
	d. [Other	provisions as needed]				
6.	By agreeme	ent with the debtor(s), t	he above-disclosed	fee does not include	the following services:	
6.	By agreeme	ent with the debtor(s), t	he above-disclosed	fee does not include	the following services:	
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6.	By agreeme	ent with the debtor(s), t	he above-disclosed	fee does not include	the following services:	

	CERTIFICATION going is a complete statement of any agreement or arrangement for representation of the debtor(s) in this bankruptcy proceeding.
11/27/2018	/s/ Patrick Best, 309732
Date	Signature of Attorney
	ARM Lawyers Name of law firm 18 N. 8th St. Stroudsburg, PA 18360
	patrick@armlawyers.com